Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department RECEIVED



Form C-103 Revised 1-1-89	1
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DISTRICT I P.O. Box 1980, Hobbs, NM 88240	IL CONSERVATIO P.O. Box 208		WELL API NO.
DISTRICT II	Santa Fe, New Mexico		30-015-26279
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III			5. Indicate Type of Lease STATE X FEE
1000 Rio Brazos Rd., Azzec, NIM 87410		O. C. D. ARIESIA, OFFICE	6. State Oil & Gas Lease No. L-5364
(DO NOT USE THIS FORM FOR PROPOS DIFFERENT RESERVOI	S AND REPORTS ON WEL SALS TO DRILL OR TO DEEPEN R. USE "APPLICATION FOR PE FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
1. Type of Well: OIL GAS WELL WELL X	OTHER		Malaga "2" State Com.
2. Name of Operator			8. Well No.
Enron Oil & Gas Company /			9. Pool name or Wildcat
P. O. Box 2267, Midland,	Texas 79702		Malaga (Atoka)
4. Well Location Unit Letter J: 2130	Feet From TheSouth	1650	Feet From The east Line
Section 2	245	28F	NMPM Eddy County
	10. Elevation (Show whether		
11. Check Apr	2974.4' GR propriate Box to Indicate	Nature of Notice. Re	eport, or Other Data
NOTICE OF INTEN	•		SEQUENT REPORT OF: 2/13/90
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CE	EMENT JOB X
OTHER:		OTHER:	
12. Describe Proposed or Completed Operations work) SEE RULE 1103.	(Clearly state all persinent details, a	nd give pertinent dates, inclu	ding estimated date of starting any proposed
3-1-90 - Set 7" 26# N-80 at 10,531'.	LT&C, 26# S-95 LT&C	, 26# S-95 Seal	Lock, & 26# P-110 Seal lock
mixing press 800	sx 50/50 poz prem m psi; disp press 18 es pressure tested	00; bump plug &	salt @ 14.2 st, disp 401.2 bbls max press 2300#. WOC - 23-1/4
I hereby certify that the information above is the and	complete to the best of my knowledge and	d belief. The Regulatory .	Analyst 3/7/90
Date Cildor	XOSKO T	me Regulatory	915/686-3714
TYPEOR PRINT NAME Betty Gilder	i 		TELEPHONE NO.
(This space for State Use) ORIGINAL S MIKE WILL!	AMS		MAR 1 2 1990
APPROVED BY SUPERVISO	_	TLE	DATE